



Johnson Smith University

Photography/Videography Agreement Form

I, _____ grant permission and give consent to Johnson C. Smith University for the release of photographs, videos or electronic media that feature myself or my likeness.

I understand my likeness may be copied, produced and distributed in various form of media, and understand my likeness may be subject to reasonable modification or editing.

I understand that, although the University will endeavor to use the my likeness in accordance with good judgment, the University cannot warrant or guarantee that any further dissemination of my likeness will be subject to University supervision or control.

Accordingly, I release the University from any and all liability related to the dissemination, reproduction, distribution, and/or display of my likeness in print or any and all other media, and any alteration, distortion or illusionary effect of my likeness,

Printed name of student

Signature of student

Phone Number

Email Address

Date

Richard ...
c ... a ... d ... a ... d'a d c d d' b d ...
a d'a .A ... ca ...
b ad ... news@jcsu.edu.

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Signature of student

Phone Number